

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Complete if Known		
			Application Number	09/687,151	
			Filing Date	October 12, 2000	
			First Named Inventor	Sie, John J.	
			Art Unit	2424	
Examiner Name	Brown, Rueben M.				
Attorney Docket Number	019281-000600US				
Sheet	1	of	2		

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Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	/Reuben Brown/			Date Considered	01/16/2010

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		
				T ²
				<input type="checkbox"/>

Examiner Signature	/Reuben Brown/	Date Considered	01/16/2010
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